

PTO/SB/21 (08-03)

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FORM

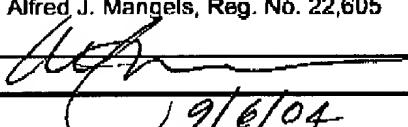
(to be used for all correspondence after initial filing)

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| Application Number | 09/945,542 | RECEIVED | |
| Filing Date | 09/02/2001 | CENTRAL FAX CENTER | |
| First Named Inventor | Ivo AGNER | SEP 06 2004 | |
| Art Unit | 3682 | | |
| Examiner Name | V. Johnson | | |
| Total Number of Pages in This Submission | 20 | Attorney Docket Number | GS 0444 A US |

ENCLOSURES (Check all that apply)

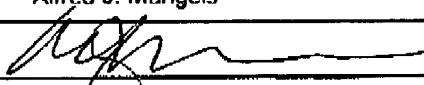
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| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Remarks | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
|---|--|--|

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Alfred J. Mangels, Reg. No. 22,605 |
| Signature |  |
| Date | 9/6/04 |

CERTIFICATE OF TRANSMISSION/MAILING

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| Typed or printed name | Alfred J. Mangels | |
| Signature |  | Date 9/6/04 |

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In re application of:]
Ivo AGNER] Group Art Unit 3682
Serial No.: 09/945,542]
Filed: September 2, 2001] Examiner: V. Johnson
For: CONTROL SYSTEM]

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated May 4, 2004 (Paper No./Mail Date 20040502), please amend the above-identified application as follows:

Amendments to the Specification – the specification is not amended by this paper.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Amendments to the Drawings – the drawings are not amended by this paper.

Remarks begin on page 8 of this paper.